

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	APPARATUS FOR DISCRETE DISTRIBUTION OF GRANULES
Attorney Docket Number::	1501-1288
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	33
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: MATS
Middle Name::
Family Name:: KJELLSSON
Name Suffix::
City of Residence:: HORBY
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing KOINGE 6860
Address::
City of Mailing Address:: HORBY
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: SE-242 92

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: CRISTER
Middle Name::
Family Name:: STARK
Name Suffix::
City of Residence:: VADERSTAD
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing LEJONBACKEN
Address::
City of Mailing Address:: VADERSTAD

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: SE-590 21

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/SE2003/00925	6/5/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0202131-9	7/5/02	Yes

Assignment Information

Assignee Name:: VADERSTAD-VERKEN AB

Street of Mailing P.O. BOX 85

Address::

City of Mailing Address:: VADERSTAD

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: SE-590 21